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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/668,459	09/25/2000	SHUJI OZAWA	862.C2005	2103

5514 7590 09/27/2005

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30 ROCKEFELLER PLAZA  
NEW YORK, NY 10112

EXAMINER

THOMPSON, JAMES A

ART UNIT	PAPER NUMBER
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2624

DATE MAILED: 09/27/2005

Please find below and/or attached an Office communication concerning this application or proceeding.



Serial No. : 09668459  
Applicant : SHUJI OZAWA  
Filing Date : September 25, 2000  
Date Mailed : September 27, 2005

## ACKNOWLEDGEMENT OF REQUEST

### *Notice of Allowance/Allowability Mailed*

The request for a corrected notice of allowance/allowability, dated August 5, 2005, has been received by the U.S. Patent and Trademark Office. A corrected notice of allowance/allowability will not be mailed, but the Office has verified the following information, and made any necessary corrections to Office computer data:

- The error in the title has been corrected as shown on the attached Bibliographic Data Sheet.

Natarsha Horne  
For the Office of Patent Publication



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**\*BIBDATASHEET\***

CONFIRMATION NO. 2103

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/668,459	<b>FILING OR 371(c) DATE</b> 09/25/2000 <b>RULE</b>	<b>CLASS</b> 358	<b>GROUP ART UNIT</b> 2624	<b>ATTORNEY DOCKET NO.</b> 862.C2005	
<b>APPLICANTS</b> SHUJI OZAWA, TOKYO, JAPAN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> JAPAN 11-272950 09/27/1999 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/27/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 5514					
<b>TITLE</b> IMAGE PROCESSING APPARATUS AND METHOD					
<b>FILING FEE RECEIVED</b> 948	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		